

STATE OF MARYLAND  
UNIFORM CRIMINAL/CIVIL CITATION



Local # \* 9 0 4 6 1 2 V 2 \*

Subject's (First) Name \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_

Driver's License No. \_\_\_\_\_ License Class \_\_\_\_\_ State \_\_\_\_\_

Current Address in Full \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Height \_\_\_\_\_ Weight \_\_\_\_\_ Race \_\_\_\_\_ Sex \_\_\_\_\_ Birthdate \_\_\_\_\_ Telephone No. \_\_\_\_\_

Hair/Style \_\_\_\_\_ Eyes \_\_\_\_\_ Complexion \_\_\_\_\_ Dress/Scars/Marks/Tattoos/Deformities \_\_\_\_\_ Day \_\_\_\_\_ Night \_\_\_\_\_

Vehicle License No. \_\_\_\_\_ State \_\_\_\_\_ Vehicle Year, Make, Type, Color \_\_\_\_\_

County/City \_\_\_\_\_ Agency \_\_\_\_\_ Area \_\_\_\_\_ SPCP \_\_\_\_\_ Arrest Type \_\_\_\_\_ Rel. Citations \_\_\_\_\_

It is formally charged that the above named person on \_\_\_\_\_, 19\_\_\_\_, at \_\_\_\_\_ M  
at (place) \_\_\_\_\_ did commit the following:

Document \_\_\_\_\_ Section \_\_\_\_\_ Sub Section \_\_\_\_\_ in violation of:

To answer the above charge lodged against you,

☐ ADULT CIVIL VIOL.  
☐ ALCOHOL VIOL.  
☐ CRIM CIT.

☐ You are hereby summoned and commanded to appear for trial in the District Court of Maryland for \_\_\_\_\_ County/City located at \_\_\_\_\_, Maryland, at \_\_\_\_\_ M on \_\_\_\_\_, 19\_\_\_\_. Your failure to obey this Citation may result in the issuance of a warrant for your arrest. See reverse for important information.  
☐ You will be notified by the Court when and where to appear for trial. The Court may impose a penalty up to \$ \_\_\_\_\_  
☐ You may pay a fine of \$ \_\_\_\_\_ by \_\_\_\_\_, 19\_\_\_\_, at \_\_\_\_\_  
☐ You may elect to stand trial. To do this you must notify \_\_\_\_\_ and avoid trial \_\_\_\_\_ by \_\_\_\_\_, 19\_\_\_\_ and the District Court will thereafter notify you of a trial date.  
If you do not pay the fine or request a trial date by the date shown,  
☐ the municipality may request that the fine be doubled to an amount not to exceed \$400. Judgment may be entered against you.  
☐ there will be a late penalty of \$ \_\_\_\_\_. If this is not paid within 15 days of this Notice, the District Court may schedule the case for trial. If you do not appear at that trial, a bench warrant will issue for your arrest and a judgment for the amount of the fine may be entered.

☐ MUNICIPALITY  
☐ JUVENILE CIVIL VIOL.

☐ You are hereby notified to appear on the \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_, at \_\_\_\_\_ M at Juvenile Services Administration Offices located at \_\_\_\_\_  
☐ You will be notified by Juvenile Services when and where to appear for a hearing.  
Full Name of Child's Legal Parent/Guardian \_\_\_\_\_ Signature of Parent/Guardian \_\_\_\_\_  
Full Address of Child's Legal Parent/Guardian \_\_\_\_\_

**NOTE: Your failure to appear may result in formal court action.**

Disposition: ☐ Forwarded to state's attorney ☐ Assigned to alcohol rehab. program  
☐ Assigned to supervised work program ☐ 20 hours ☐ 40 hours  
☐ Parent/Guardian agrees to withdraw consent for a period of ☐ 30 days ☐ 60 days ☐ 90 days.  
after child is eligible, and has applied, for a driver's license.

Intake Officer's Signature \_\_\_\_\_ Hearing Date \_\_\_\_\_

Signature of Parent/Guardian Withdrawing Consent \_\_\_\_\_ Date \_\_\_\_\_

I acknowledge receipt of a copy of this Citation and hereby submit to the jurisdiction of the Court. I have a right to stand trial for the offense(s) charged. If I do not exercise the right, I agree to entry by the court of judgment on affidavit for the amount of the fine.

☒ Defendant's Signature \_\_\_\_\_ Date \_\_\_\_\_  
I solemnly affirm under the penalties of perjury that the contents of the foregoing paper are true to the best of my knowledge, information, and belief.

Officer's Signature \_\_\_\_\_ Date \_\_\_\_\_ Assgmt. \_\_\_\_\_ ID No. \_\_\_\_\_

**Note to Law Enforcement: Remove this first copy of citation before entering witness information.**

**TO THE DISTRICT COURT:**

**PLEASE SUMMONS THE FOLLOWING WITNESSES:**

NAME

ADDRESS

CITY

STATE

ZIP

DAY PHONE

ROOM #

NIGHT PHONE

APT. #

If Law Enforcement ☐ Agency

☐ Sub-Agency

☐ ID.

NAME

ADDRESS

CITY

STATE

ZIP

DAY PHONE

ROOM #

NIGHT PHONE

APT. #

If Law Enforcement ☐ Agency

☐ Sub-Agency

☐ ID.

NAME

ADDRESS

CITY

STATE

ZIP

DAY PHONE

ROOM #

NIGHT PHONE

APT. #

If Law Enforcement ☐ Agency

☐ Sub-Agency

☐ ID.

**PROBABLE CAUSE**

I solemnly affirm under the penalties of perjury that the contents of the foregoing paper are true to the best of my knowledge, information, and belief.

Officer's Signature

Date

**REQUEST FOR ADJUDICATION**

The Defendant charged on this Citation

- ☐ Has given notice of intention to stand trial.
- ☐ Has requested the presence of the issuing officer at trial.
- ☐ Has failed to pay the fine or give notice of intention to stand trial by the dates set forth on the citation.

It is requested that the Defendant be summoned to appear for trial.

- ☐ The Municipality has doubled the fine amount. The original fine was

\$ ..... The fine for which Defendant is liable is \$ .....

Date

Agency Signature